PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OM8 0651-0032
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Substitute for Form PTO-875											10,506,365		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									·OR		ER THAN		
FOR			NUMBER FILED N			AMBER EXTRA		RATE	FEE	7	RATE	ESE	
(37	SIC FEE CFR 1.16(a))						7		·3850	1	100.15	FEE	
	TAL CLAIMS CFR 1.16(c))		/. minus 20 =		· /Q		1	X \$_ =	12320	7		 ' -	
INE (37	CFR 1.18(b))	AIMS	/ minus 3 =		. 4		1		 	OR	X ===	 -	
		IDENT CLANA			L		┨	X 5 =	 	OR	X \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))								+:=		OR	+3=		
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		OR	TOTAL		
		CLAIMS A	S AMENDE	D - P	ART II						•		
	·	(Column			Column 2)	(Column 3)		SMALL I	ENTITY	OR		R THAN ENTITY	
AMENDMENT A		REMAIN AFTE AMENDA	IING R	PRI	HIGHEST HUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
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E	Independent (37 GFR 1.16(b))	10	Minus		13	•	1	x : 43.°=	289.06	OR	X \$=		
₹	FIRST PRESE		A.TIPLE DEPEN	DENT C	AM (37 C)	ED 4 48/4m		X 1 1 2 =	107.00	OR	X \$=		
			ON OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				1 1	TOTAL		OR	+5 =		
7	7/1/18							ADD'L FEE	1823,60	OR	TOTAL ADD'L FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS , HIGHEST												
AMENDMENT B		REMAINI AFTER AMENDM	NG L	PRE	UMBER VIOUSLY VID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL	
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	(37 CFR 1,16(b))	26	Minus	10	23	-(/	t	x : =		OR	X 8 =		
{	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(0))						t			OR	X \$=		
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		(Column 1)	(Co	olumn 2)	(Column 3)		_					
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ξľ	Total (3) CFR 1.16(cf)	•	Minus	- '~	B POR		ŀ		FEE	I		FEE	
1	independent (37 CFR 1.58(b))	· -	Minus	7		-	-	X \$		OR	X \$=		
ş۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1, 16(d))						1	× 8		OR	x s		
1	rms: MESEN	ATION OF MUL	TIPLE DEPEND	ENT CLA	IM (37 CFR	•	+ 5		OR	+ 5	i		
	N the act :	al 4					- 4	OTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	M DIE THANKS!	Number Prew	DUSIV Paid For	IN THE	ら ぐりょへた げ	"0" in column 3. less than 20, or							
~ (the "Highest !	vumber Previo	rusly Paid For	IN THIS	SPACE I	less than 1 and							

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" [Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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